

Fill in this information to identify the case:

Debtor name **BILL HALL, JR., TRUCKING, LTD.**

United States Bankruptcy Court for the: **WESTERN DISTRICT OF TEXAS**

Case number (if known) **16-52608**

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **December 6, 2016**

X /s/ DOMINIQUE HALL

Signature of individual signing on behalf of debtor

DOMINIQUE HALL

Printed name

AUTHORIZED REPRESENTATIVE OF GENERAL PARTNER

Position or relationship to debtor

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United States Bankruptcy Court for the: **WESTERN DISTRICT OF TEXAS**

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**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets

1. Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ 0.00
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ 1,410,128.54
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ 1,410,128.54

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ 379,853.44
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ 0.00
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ 1,070,764.22
4. Total liabilities Lines 2 + 3a + 3b	\$ 1,450,617.66

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Official Form 206A/B Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. **Checking, savings, money market, or financial brokerage accounts** (Identify all)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. **WELLS FARGO**

BUSINESS CHECKING

0213

\$1,000.00

4. **Other cash equivalents** (Identify all)

5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$1,000.00

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less:

170,180.00

-

0.00

=

\$170,180.00

face amount

doubtful or uncollectible accounts

Debtor **BILL HALL, JR., TRUCKING, LTD.**
Name

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11a. 90 days old or less: **329,948.54** - **0.00** = **\$329,948.54**
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$500,128.54

Part 4: Investments

13. Does the debtor own any investments?

- ☐ No. Go to Part 5.
☒ Yes Fill in the information below.

Valuation method used
for current value

Current value of
debtor's interest

14. **Mutual funds or publicly traded stocks not included in Part 1**
Name of fund or stock:

15. **Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**

Name of entity: % of ownership

15.1. **Haco Holding** % **\$0.00**

15.2. **Bill Hall, Jr. Trucking, LLC** % **\$0.00**

16. **Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**
Describe:

17. **Total of Part 4.**

Add lines 14 through 16. Copy the total to line 83.

\$0.00

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

General description

Net book value of
debtor's interest
(Where available)

Valuation method used
for current value

Current value of
debtor's interest

Debtor BILL HALL, JR., TRUCKING, LTD.
NameCase number (If known) 16-52608

39. **Office furniture**
DESKS, CHAIRS, COMPUTERS, PRINTERS,
COUCHES \$10,000.00 N/A \$0.00

40. **Office fixtures**41. **Office equipment, including all computer equipment and communication systems equipment and software**42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$0.0044. **Is a depreciation schedule available for any of the property listed in Part 7?**☒ No☐ Yes45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**☒ No☐ Yes**Part 8: Machinery, equipment, and vehicles**46. **Does the debtor own or lease any machinery, equipment, or vehicles?**☐ No. Go to Part 9.☒ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)		Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles				
47.1.	2005 Peterbilt 379 - Tractor 1XP5DB9X75N838850	<u>\$0.00</u>		<u>\$30,000.00</u>
47.2.	2005 Peterbilt 379 - Tractor 1XP5DB9X75N838847	<u>\$0.00</u>		<u>\$30,000.00</u>
47.3.	2005 Peterbilt 379 - Tractor 1XP5DB9X75N838855	<u>\$0.00</u>		<u>\$30,000.00</u>
47.4.	2005 Peterbilt 379 - Tractor 1XP5DB9X75N838853	<u>\$0.00</u>		<u>\$30,000.00</u>
47.5.	2005 Peterbilt 379 - Tractor 1XP5DB9X75N838866	<u>\$0.00</u>		<u>\$30,000.00</u>
47.6.	2005 Peterbilt 379 - Tractor 1XP5DB9X75N838860	<u>\$0.00</u>		<u>\$30,000.00</u>

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47.7.	2005 Peterbilt 379 - Tractor 1XP5DB9X75N838851	\$0.00	\$30,000.00
47.8.	2005 Peterbilt 379 - Tractor 1XP5DB9X75N838851	\$0.00	\$30,000.00
47.9.	2005 Peterbilt 379 - Tractor 1XP5DB9X75N838848	\$0.00	\$30,000.00
47.10	2008 Kenworth T-800B - Tractor 1XKWDB9X98J227000	\$0.00	\$50,000.00
47.11	2010 Peterbilt 379 - Tractor 1XPHD49X0AD104201	\$0.00	\$45,000.00
47.12	2010 Peterbilt 379 - Tractor 1XPHD49X0AD104149	\$0.00	\$45,000.00
47.13	2010 Peterbilt 379 - Tractor 1XPHD49X0AD104209	\$0.00	\$45,000.00
47.14	2010 Peterbilt 379 - Tractor 1XPHD49X0AD104221	\$0.00	\$45,000.00
47.15	2010 Peterbilt 379 - Tractor 1XPHD49X0AD104205	\$0.00	\$45,000.00
48.	Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels		
48.1.	2006 Transcraft 53' - Flatbed 1TTF5320861081430	\$0.00	\$9,000.00
48.2.	2006 Transcraft 53' - Flatbed 1TTF5320861081379	\$0.00	\$9,000.00
48.3.	2006 Transcraft 53' - Flatbed 1TTF5320861081381	\$0.00	\$9,000.00
48.4.	2006 Transcraft 53' - Flatbed 1TTF5320861081406	\$0.00	\$9,000.00
48.5.	2006 Transcraft 53' - Flatbed 1TTF5320861081391	\$0.00	\$9,000.00
48.6.	CPS Belly Dump Trailer 4Z45154232P004064	\$0.00	\$18,000.00

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48.7.	2002 Clement Endlite Trailer 5C2BB38B4M003524	\$0.00	\$20,000.00
48.8.	2002 Clement Endlite Trailer 5C2BB38B4M003694	\$0.00	\$20,000.00
48.9.	2005 Clement Endlite Trailer 5C2BB38B4M004497	\$0.00	\$20,000.00
48.10	2004 Clement Endlite Trailer 5C2BB38B4M004092	\$0.00	\$20,000.00
48.11	2006 Clement Endlite Trailer 5C2BB38B4M005253	\$0.00	\$20,000.00
48.12	2006 Clement Endlite Trailer 5C2BB38B4M005144	\$0.00	\$20,000.00
48.13	2006 Clement Endlite Trailer 5C2BB38B4M005143	\$0.00	\$20,000.00
48.14	2006 Clement Endlite Trailer 5C2BB38B4M004497	\$0.00	\$20,000.00
48.15	2006 Clement Endlite Trailer 5C2BB38B4M005096	\$0.00	\$20,000.00
48.16	2006 Clement Endlite Trailer 5C2BB38B4M005140	\$0.00	\$20,000.00
48.17	2006 Clement Endlite Trailer 5C2BB38B4M005095	\$0.00	\$20,000.00
48.18	1999 CPS End Dump Trailer 4Z4515429XP002083	\$0.00	\$18,000.00
48.19	1999 CPS End Dump Trailer 4Z4515429XP002034	\$0.00	\$18,000.00
48.20	2010 Peterbilt 379 - Tractor 1XPHD49X0AD104205	\$0.00	\$45,000.00
49.	Aircraft and accessories		
50.	Other machinery, fixtures, and equipment (excluding farm machinery and equipment)		

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51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$909,000.00

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

☒ No

☐ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

☒ No

☐ Yes

Part 9: Real property

54. **Does the debtor own or lease any real property?**

☒ No. Go to Part 10.

☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

☒ No. Go to Part 11.

☐ Yes Fill in the information below.

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☒ No. Go to Part 12.

☐ Yes Fill in the information below.

Debtor **BILL HALL, JR., TRUCKING, LTD.**
Name

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Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$1,000.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$500,128.54	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$0.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$909,000.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	\$0.00	
91. Total. Add lines 80 through 90 for each column	\$1,410,128.54	\$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$1,410,128.54

Fill in this information to identify the case:

Debtor name **BILL HALL, JR., TRUCKING, LTD.**United States Bankruptcy Court for the: **WESTERN DISTRICT OF TEXAS**Case number (if known) **16-52608**☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	ALBERT URESTI, MPA, PCC <small>Creditor's Name</small> BEXAR COUNTY TAX ASSESSOR P.O. Box 2903 San Antonio, TX 78299 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number 0010 Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$119,348.29	Unknown
2.2	COMAL COUNTY <small>Creditor's Name</small> P.O. BOX 659480 San Antonio, TX 78265 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number 0000 Do multiple creditors have an interest in the same property?	Describe debtor's property that is subject to a lien Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply	\$38,552.50	Unknown

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- ☒ No
☐ Yes. Specify each creditor, including this creditor and its relative priority.
- ☐ Contingent
☐ Unliquidated
☐ Disputed

2.3	ENGS COMMERCIAL FINANCE <small>Creditor's Name</small> P.O. BOX 71347 Chicago, IL 60694 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number 0010 Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <hr/> Describe the lien <hr/> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$165,416.45	Unknown
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2.4	HAYS COUNTY <small>Creditor's Name</small> 14306 RANCH RD. 12 SUITE 11 Wimberley, TX 78676 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <hr/> Describe the lien <hr/> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$4,760.82	Unknown
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2.5	UVALDE COUNTY APPRAISAL DISTRICT <small>Creditor's Name</small> 209 NORTH HIGH STREET Uvalde, TX 78801-5207 <small>Creditor's mailing address</small>	Describe debtor's property that is subject to a lien <hr/> Describe the lien <hr/>	\$51,775.38	Unknown
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Debtor	BILL HALL, JR., TRUCKING, LTD.	Case number (if know)	16-52608
	<small>Name</small>		

Creditor's email address, if known Date debt was incurred Last 4 digits of account number 2290	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. **\$379,853.44**

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div>	On which line in Part 1 did you enter the related creditor? <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div>	Last 4 digits of account number for this entity <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div>
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Fill in this information to identify the case:Debtor name **BILL HALL, JR., TRUCKING, LTD.**United States Bankruptcy Court for the: **WESTERN DISTRICT OF TEXAS**Case number (if known) **16-52608**☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☒ No. Go to Part 2.☐ Yes. Go to line 2.**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address A & A PUMP CO. 1119 CAMDEN San Antonio, TX 78215 Date(s) debt was incurred ____ Last 4 digits of account number 4009	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$309.91
3.2	Nonpriority creditor's name and mailing address AFS/IBEX FINANCIAL SERVICES P.O. BOX 650786 Dallas, TX 75265-0786 Date(s) debt was incurred ____ Last 4 digits of account number 7823	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,058.31
3.3	Nonpriority creditor's name and mailing address AIRGAS P.O. BOX 676015 Dallas, TX 75267-6015 Date(s) debt was incurred ____ Last 4 digits of account number 4837	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$772.25
3.4	Nonpriority creditor's name and mailing address AMERICAN ELECTRIC P.O. BOX 24404 Canton, OH 44701-4404 Date(s) debt was incurred ____ Last 4 digits of account number 9800	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,767.00

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3.5	Nonpriority creditor's name and mailing address AMERICAN EXPRESS P.O. BOX 650448 Dallas, TX 75265-0448 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>35SA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24,120.09
3.6	Nonpriority creditor's name and mailing address ARNOLD OIL COMPANY OF AUSTIN 5909 BURLESON RD. Austin, TX 78744 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>1008</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,506.44
3.7	Nonpriority creditor's name and mailing address AT&T MOBILITY P.O. BOX 6463 Carol Stream, IL 60197-6463 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>1001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,976.88
3.8	Nonpriority creditor's name and mailing address BARTON, EAST & CALDWELL, P.L.L.C 700 N. ST MARY'S ST. SUITE 1825 San Antonio, TX 78205 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>1338</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,836.85
3.9	Nonpriority creditor's name and mailing address BEXAR TRAILER SALES & SERVICE 4300 HWY 90 E. San Antonio, TX 78219 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>0003</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,998.61
3.10	Nonpriority creditor's name and mailing address BOHLS BEARING POWER TRANSMISSION SERVICE 211 PROBANDT ST. San Antonio, TX 78204 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>9600</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$844.35
3.11	Nonpriority creditor's name and mailing address BRANDOUTFITTERS 424 W. NAKOMA San Antonio, TX 78216 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>1447</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$149.24

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BILL HALL, JR., TRUCKING, LTD. Name		
3.12 Nonpriority creditor's name and mailing address Brian Macintosh c/o Margaret Rogers Progressive Insurance Claims Dept. P.O. Box 512926 Los Angeles, CA 90051 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.13 Nonpriority creditor's name and mailing address BRIDGE HEAD I.T. 2810 N. FLORES ST. San Antonio, TX 78212 Date(s) debt was incurred ____ Last 4 digits of account number 8783	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,489.75
3.14 Nonpriority creditor's name and mailing address CITY OF NEW BRAUNFELS ALARM PROGRAM P.O. BOX 140457 Irving, TX 75014-0457 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100.00
3.15 Nonpriority creditor's name and mailing address CMI 6704 GUADA COMA Schertz, TX 78154 Date(s) debt was incurred ____ Last 4 digits of account number 9529	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,740.95
3.16 Nonpriority creditor's name and mailing address COLLISION COUNTRY REPAIR 4282 IH 10 EAST San Antonio, TX 78219 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29,867.72
3.17 Nonpriority creditor's name and mailing address COMMUNITY HEALTH DEVELOPMENT, INC. 908 SOUTH EVANS BLDG Uvalde, TX 78801 Date(s) debt was incurred ____ Last 4 digits of account number 1009	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,978.00
3.18 Nonpriority creditor's name and mailing address CONTINENTAL TIRE THE AMERICAS, LLC P.O. BOX 60049 Charlotte, NC 28260-0049 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,574.69

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3.19	Nonpriority creditor's name and mailing address D&D TWIN PRINT 6387 BABCOCK RD. #2 San Antonio, TX 78240 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>3099</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,237.11
<hr/>			
3.20	Nonpriority creditor's name and mailing address DOGGETT FREIGHTLINER P.O. BOX 201150 San Antonio, TX 78239 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>0802,1019,6079,</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,200.00
<hr/>			
3.21	Nonpriority creditor's name and mailing address ENVIROMENTAL COMPLIANCES ALERT P.O. BOX 3019 Malvern, PA 19355 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>0710</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$299.00
<hr/>			
3.22	Nonpriority creditor's name and mailing address EXXON MOBIL V Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>4488</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,147.25
<hr/>			
3.23	Nonpriority creditor's name and mailing address FLEET PRIDE P.O. BOX 847118 Dallas, TX 75284-7118 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>8302</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26,503.46
<hr/>			
3.24	Nonpriority creditor's name and mailing address FLEETMATICS 1100 WINTER ST. SUITE 4600 Waltham, MA 02451 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>3477</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$71,818.50
<hr/>			
3.25	Nonpriority creditor's name and mailing address FLEETSCREEN, LTD 2421 W.7TH ST. SUITE 350 Fort Worth, TX 76107 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>5177</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$447.50

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3.26	Nonpriority creditor's name and mailing address FORT BEND COUNTY TOLL ROAD P.O. BOX 9970 Trenton, NJ 08650-2970 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>2427</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$84.00
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3.27	Nonpriority creditor's name and mailing address FRENCH ELLISON 9010 IH-10 EAST Converse, TX 78109 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>2161</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$121,204.74
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3.28	Nonpriority creditor's name and mailing address GRANDE FORD CENTER P.O. BOX 201210 San Antonio, TX 07822 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>4123</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,612.54
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3.29	Nonpriority creditor's name and mailing address IBT, INC 4914 N.W.LOOP 410 SUITE 102 San Antonio, TX 78229 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>3019</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$248.02
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3.30	Nonpriority creditor's name and mailing address INDUSTRIAL COMMUNICATIONS 1019 E. EUCLID ST. San Antonio, TX 78212-4598 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>788A</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,140.49
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3.31	Nonpriority creditor's name and mailing address INTERNAL REVENUE SERVICE Cincinnati, OH 45999-0150 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>9782</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>941 Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,571.18
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3.32	Nonpriority creditor's name and mailing address INTERNAL REVENUE SERVICE Cincinnati, OH 45999-0150 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>9782</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>RoadTaxe - 2015</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,493.73
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Debtor	Name	Case number (if known)	16-52608
3.33	Nonpriority creditor's name and mailing address INTERNAL REVENUE SERVICE P.O. Box 21126 Philadelphia, PA 19114 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.34	Nonpriority creditor's name and mailing address Internal Revenue Service Special Procedures Staff STOP 5022 AUS 300 E. 8th St. Austin, TX 78701 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.35	Nonpriority creditor's name and mailing address INTERSTATE BILLING SERVICES P.O. BOX 2206 Decatur, AL 35609-2208 Date(s) debt was incurred ____ Last 4 digits of account number <u>TRU,BIL</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$627.46
3.36	Nonpriority creditor's name and mailing address J.J. KELLER P.O. BOX 6609 Carol Stream, IL 60197-6609 Date(s) debt was incurred ____ Last 4 digits of account number <u>7759</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,005.11
3.37	Nonpriority creditor's name and mailing address JACKSON TOWING 2047 RIGSBY AVE. San Antonio, TX 78210 Date(s) debt was incurred ____ Last 4 digits of account number <u>2926</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$315.00
3.38	Nonpriority creditor's name and mailing address KIMBALL MIDWEST DEPT L-2780 Columbus, OH 43260-2780 Date(s) debt was incurred ____ Last 4 digits of account number <u>7926</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,218.75
3.39	Nonpriority creditor's name and mailing address Lloyd Van Winkle c/o Diana E. Almeter USAA Insurance - Subrogation Dept. P.O. Box 659476 San Antonio, TX 78265 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

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3.40	Nonpriority creditor's name and mailing address LOGIX P.O. BOX 3608 Houson, TX 77253-2606 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>8371</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$586.03
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3.41	Nonpriority creditor's name and mailing address LONE STAR RADIATOR, CO., INC 1227 BASSE RD. San Antonio, TX 78212 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>2104</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$351.81
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3.42	Nonpriority creditor's name and mailing address MARYLAND TRANSPORTION AUTHORITY CTRMA PROCESSING PO. BOX 16777 Austin, TX 78761 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>3660</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$86.00
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3.43	Nonpriority creditor's name and mailing address MC GEE CO. 8504 CHANCELLOR ROW Dallas, TX 75247 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>T653</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$201.69
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3.44	Nonpriority creditor's name and mailing address MESQUITE CREEK LANDFILL 1700 KOHLENBERG RD. New Braunfels, TX 78130 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>0001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,892.20
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3.45	Nonpriority creditor's name and mailing address MIDSTATE ENVIRONMENTAL P.O. BOX 261180 Corpus Christi, TX 78426 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>NV55</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$328.60
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3.46	Nonpriority creditor's name and mailing address MSB CTRMA PROCESSIN P.O. Box 16777 Austin, TX 78761 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>4885</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$87.92
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3.47	Nonpriority creditor's name and mailing address NAPA AUTO PARTS F& F AUTO SUPPLY 720 E. MAIN Uvalde, TX 78801 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>2080</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,039.90
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3.48	Nonpriority creditor's name and mailing address NORTHEAST METHODIST HOSPITAL 12412 JUDSON RD. Live Oak, TX 78801 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>6531</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$794.00
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3.49	Nonpriority creditor's name and mailing address OFFICE DEPOT BUSINESS CREDIT CARD DEPT.#56-4202063342 P.O. Box 78004 Phoenix, AZ 85062 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>2JUD</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,427.92
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3.50	Nonpriority creditor's name and mailing address OGBURN'S TRUCK PARTS P.O. BOX 4630 Fort Worth, TX 76164-0630 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>3342</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,515.75
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3.51	Nonpriority creditor's name and mailing address PADGETT STRATEMANN 100 N.E. LOOP 410 SUITE 1100 San Antonio, TX 78216 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>7819</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,000.00
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3.52	Nonpriority creditor's name and mailing address PRAXAIR P.O. BOX 120812 Dallas, TX 75312-0812 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>8348</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,150.83
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3.53	Nonpriority creditor's name and mailing address PRO-VIGIL INC. 4646 PERRIN CREEK SUITE 280 San Antonio, TX 78217 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>8098</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,956.63
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3.54	Nonpriority creditor's name and mailing address PROGRESSIVE INS. P.O. BOX 105428 Atlanta, GA 30348-5428 Date(s) debt was incurred ____ Last 4 digits of account number <u>B857</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,378.33
<hr/>			
3.55	Nonpriority creditor's name and mailing address PROTECTION SECURITY SOLUTIONS P.O. BOX 219044 Kansas City, MO 64121-9044 Date(s) debt was incurred ____ Last 4 digits of account number <u>6182</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,348.27
<hr/>			
3.56	Nonpriority creditor's name and mailing address QUALITY ACCESS CONTROL SYSTEM 13115 WETMORE RD, SAN ANTONIO, TEXAS 782 San Antonio, TX 78247 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$346.58
<hr/>			
3.57	Nonpriority creditor's name and mailing address R. COMMUNICATIONS P.O. BOX 758 Uvalde, TX 78802 Date(s) debt was incurred ____ Last 4 digits of account number <u>3187,3618,4554,4092,</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$160.00
<hr/>			
3.58	Nonpriority creditor's name and mailing address RAMIREZ AUTO GLASS 2703 COMMERICAL San Antonio, TX 78221 Date(s) debt was incurred ____ Last 4 digits of account number <u>2572</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$159.00
<hr/>			
3.59	Nonpriority creditor's name and mailing address RELADYNE 9395 KENWOOD RD. SUITE 104 Blue Ash, OH 45424 Date(s) debt was incurred ____ Last 4 digits of account number <u>4009</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$146,815.37
<hr/>			
3.60	Nonpriority creditor's name and mailing address RMS P.O. BOX 361598 Columbus, OH 43236 Date(s) debt was incurred ____ Last 4 digits of account number <u>9745</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,063.93

Debtor	BILL HALL, JR., TRUCKING, LTD. <small>Name</small>	Case number (if known)	16-52608
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3.61	Nonpriority creditor's name and mailing address RUSH TRUCK CENTER 8922 IH 10 EAST Converse, TX 78109-5174 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>0285</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$627.46
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3.62	Nonpriority creditor's name and mailing address SA QUALITY FENCE 13115 WETMORE RD. San Antonio, TX 78247 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>2968</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,087.56
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3.63	Nonpriority creditor's name and mailing address SAM'S CLUB MEMBERSHIP P.O BOX 659783 San Antonio, TX Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>8001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,731.79
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3.64	Nonpriority creditor's name and mailing address SAN ANTONIO BRAKE AND CLUTCH P.O. BOX 976 San Antonio, TX 78294 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>BS52</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$855.72
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3.65	Nonpriority creditor's name and mailing address SANKEY 925 AVENUE B. San Antonio, TX 78215 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>4318</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,229.24
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3.66	Nonpriority creditor's name and mailing address SCI DISTRIBUTION 300 S. MADISON AVE, SUITE 2 Clearwater, FL 33756 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>6104</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,113.40
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3.67	Nonpriority creditor's name and mailing address SOLUTION TARPS LLC 8034 CULEBRA RD. SUITE 100 San Antonio, TX 78251 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>1025</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$863.45
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Debtor	BILL HALL, JR., TRUCKING, LTD. <small>Name</small>	Case number (if known)	16-52608
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3.68	Nonpriority creditor's name and mailing address SOUTHERN FIELD MAINTENANCE P.O. BOX 201055 San Antonio, TX 78220 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>V945,968,973</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,841.04
3.69	Nonpriority creditor's name and mailing address SOUTHERN TIRE MART LLC P.O. BOX 1000 Memphis, TN 38148-0143 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>0901</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$47,203.00
3.70	Nonpriority creditor's name and mailing address SPORTS PROMOTION NETWORK P.O. BOX 200548 Arlington, TX 76006 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>2600</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$419.90
3.71	Nonpriority creditor's name and mailing address ST DAVID S. AUSTIN MED CENTER 901 W.BEN WHITE BLVD. Austin, TX 78704-6903 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>5614</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,797.00
3.72	Nonpriority creditor's name and mailing address STATE OF ARKANSAS DEPT OF FINANCE & ADMI 1509 W. 7TH ST Little Rock, AR 72201 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>4358</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100.00
3.73	Nonpriority creditor's name and mailing address STREAMLINE PRODUCTION SYSTEMS 36 BLUE QUAIL COURT Victoria, TX 77905 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>3614</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$450.00
3.74	Nonpriority creditor's name and mailing address SYN-CO CHEMICALS P.O. BOX 478 Spring Branch, TX 78070 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>4721</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,565.70

Debtor	BILL HALL, JR., TRUCKING, LTD. <small>Name</small>	Case number (if known)	16-52608
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3.75	Nonpriority creditor's name and mailing address T & W TIRES P.O. BOX 258859 Oklahoma City, OK 73125-8859 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>2616</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,301.00
3.76	Nonpriority creditor's name and mailing address TELETRAC 32472 COLLECTION CENTER DR. Chicago, IL 60693-0324 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>6284</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$162.00
3.77	Nonpriority creditor's name and mailing address TEXAS ALCOHOL AND DRUG TESTING SERVICES 16903 RED OAK DR. SUITE 130 Houston, TX 77090-3938 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>9405</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$480.00
3.78	Nonpriority creditor's name and mailing address TEXAS COMPTROLLER OF PUBLIC ACCT P.O. BOX 13528 Austin, TX 78711-3528 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>3074</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$146,258.46
3.79	Nonpriority creditor's name and mailing address TEXAS DEPARTMENT OF INSURANCES P.O. Box 149104 Austin, TX 78714-9104 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>6286</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$177.50
3.80	Nonpriority creditor's name and mailing address TEXAS MED CLINIC 13722 EMBASSY ROW San Antonio, TX 78216-2000 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$540.00
3.81	Nonpriority creditor's name and mailing address TEXDOOR LTD 11202 BOMAR LANE San Antonio, TX 78233 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>1896</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$153.72

Debtor	BILL HALL, JR., TRUCKING, LTD. Name	Case number (if known)	16-52608
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3.82	Nonpriority creditor's name and mailing address TIFCO INDUSTRIES P.O. BOX 40277 Houston, TX 77240-0277 Date(s) debt was incurred ____ Last 4 digits of account number <u>3351</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$219.09
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3.83	Nonpriority creditor's name and mailing address TIGER SANITATION P.O. BOX 844909 Dallas, TX 75284-4909 Date(s) debt was incurred ____ Last 4 digits of account number <u>1433</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$297.06
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3.84	Nonpriority creditor's name and mailing address TRUCK PRO 29787 NETWORK PLACE Chicago, IL 60679-1787 Date(s) debt was incurred ____ Last 4 digits of account number <u>5724</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,162.92
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3.85	Nonpriority creditor's name and mailing address TRUMP EQUIPMENT CO., LLC 4941 EMIL RD. San Antonio, TX 78219 Date(s) debt was incurred ____ Last 4 digits of account number <u>A020</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$681.83
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3.86	Nonpriority creditor's name and mailing address TXTAG P.O. BOX 650749 Dallas, TX 75265-0749 Date(s) debt was incurred ____ Last 4 digits of account number <u>0901</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$252.58
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3.87	Nonpriority creditor's name and mailing address U.S. Attorney 601 NW Loop 410, Suite 600 San Antonio, TX 78216 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.88	Nonpriority creditor's name and mailing address U.S. BANK BUSINESS EDGE CASH REWARDS CAR P.O. BOX 790408 St. Louis, MO 63179-0408 Date(s) debt was incurred ____ Last 4 digits of account number <u>8807</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,912.44
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Debtor	BILL HALL, JR., TRUCKING, LTD. <small>Name</small>	Case number (if known)	16-52608
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3.89	Nonpriority creditor's name and mailing address UNION SERCURITY INSURANCES P.O. BOX 419052 Kansas City, MO 64141-6052 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$900.00
3.90	Nonpriority creditor's name and mailing address United States Attorney General Main Justice Bldg., Rm. 5111 10th & constitution Ave., NW Washington, DC 20530 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.91	Nonpriority creditor's name and mailing address VANGUARD TRUCK SERVICES INTERSTATE BILLING SERVICES INC. P.O. Box 2208 Decatur, AL 35609-2208 Date(s) debt was incurred ____ Last 4 digits of account number <u>2289</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$451.62
3.92	Nonpriority creditor's name and mailing address Vehifax Corporation 555 Broad Hollow Road, Suite 210 Melville, NY 11747 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Commercial Lease Agreement on (5) 2016 Clment Starlight and Dump Trailers</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$210,000.00
3.93	Nonpriority creditor's name and mailing address VIRTUAL BUILDERS EXCHANGE YP 4047 NACO PERRIN, SUITE 100 San Antonio, TX 78217 Date(s) debt was incurred ____ Last 4 digits of account number <u>7934</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$649.00
3.94	Nonpriority creditor's name and mailing address YP P.O. BOX 5010 Carol Stream, IL 60197-5010 Date(s) debt was incurred ____ Last 4 digits of account number <u>4755</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$324.10

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Debtor **BILL HALL, JR., TRUCKING, LTD.**
Name

Case number (if known) **16-52608**

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 0.00
5b. +	\$ 1,070,764.22
5c.	\$ 1,070,764.22

Fill in this information to identify the case:

Debtor name BILL HALL, JR., TRUCKING, LTD.

United States Bankruptcy Court for the: WESTERN DISTRICT OF TEXAS

Case number (if known) 16-52608

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal*

Property

(Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **Trailers**

State the term remaining

List the contract number of any government contract

Vehifax Corporation
555 Broad Hollow Road, Suite 210
Melville, NY 11747

Fill in this information to identify the case:

Debtor name **BILL HALL, JR., TRUCKING, LTD.**

United States Bankruptcy Court for the: **WESTERN DISTRICT OF TEXAS**

Case number (if known) **16-52608**

☐ Check if this is an amended filing

Official Form 206H Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the code debtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Code debtor

Column 2: Creditor

Name	Mailing Address	Name	Check all schedules that apply:
2.1	Street City State Zip Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2	Street City State Zip Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3	Street City State Zip Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4	Street City State Zip Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:

Debtor name BILL HALL, JR., TRUCKING, LTD.

United States Bankruptcy Court for the: WESTERN DISTRICT OF TEXAS

Case number (if known) 16-52608

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply

Gross revenue
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:
From 1/01/2016 to **Filing Date**

☒ Operating a business
☐ Other _____

\$6,690,861.35

For prior year:
From 1/01/2015 to 12/31/2015

☒ Operating a business
☐ Other _____

\$16,065,654.46

For year before that:
From 1/01/2014 to 12/31/2014

☒ Operating a business
☐ Other _____

\$18,991,415.50

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

Debtor **BILL HALL, JR., TRUCKING, LTD.**Case number (if known) **16-52608**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. ENGS COMMERCIAL FINANCE P.O. BOX 71347 Chicago, IL 60694	September 30, 2016 October 21, 2016	\$11,408.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___
3.2. Signature Finance P.O. Box 5524 Hicksville, NY 11802	September 12, 2016 September 20, 2016 October 20, 2016	\$17,500.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___
3.3. ARNOLD OIL COMPANY OF AUSTIN 5909 BURLESON RD. Austin, TX 78744	August 10, 2016	\$6,962.35	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___
3.4. IPFS Insurance	October 3, 2016 October 21, 2016	\$79,607.41	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___
3.5. FLEET PRIDE P.O. BOX 847118 Dallas, TX 75284-7118	August 16, 2016 September 2, 2016 October 3, 2016 November 1, 2016	\$8,000.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___
3.6. FRANCIS HALL	August 10, 2016 through November 10, 2016 Weekly payments	\$48,700.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___
3.7. Dominique Hall	August 10, 2016 through November 10, 2016 Weekly payments	\$13,200.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___
3.8. AMERICAN EXPRESS P.O. BOX 650448 Dallas, TX 75265-0448	August 26, 2016 September 28, 2016	\$32,737.43	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___

Debtor **BILL HALL, JR., TRUCKING, LTD.**Case number (if known) **16-52608**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.9. PADGETT STRATEMANN 100 N.E. LOOP 410 SUITE 1100 San Antonio, TX 78216	October 10, 2016	\$13,115.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
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5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.	Mario Hernandez vs. Bill Hall, Jr. Trucking, Ltd. 2016-CI-01595		Bexar County 438th Judicial District Court	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2.	Charles Ray McGary vs. Bill Hall, Jr. Trucking, Ltd. 15-07-13510		293rd Judicial District Court Zavala County, Texas	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.3.	Deborah May Rhodes vs. Bill Hall, J r. Trucking, Ltd. 15-07-00150-CVK		218th Judicial District Karnes County, Texas	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **BILL HALL, JR., TRUCKING, LTD.**Case number (if known) **16-52608**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.4.	William Macon vs. Bill Hall, Jr. Trucking, Ltd. 2014-CI-11345		150th Judicial District Court Bexar County, Texas	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.5.	Gillermo A. Torres vs. Bill Hall, Jr. Trucking, Ltd. 2016-CI-13323		37th Judicial District Court Bexar County, Texas	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☐ None

	Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1.	San Antonio Livestock 723 AT&T Center Parkway San Antonio, TX 78219		01/21/2014	\$1,500.00
	Recipients relationship to debtor			
9.2.	Ronald McDonald House 227 Lewis St. San Antonio, TX 78212		03/826/2014	\$3,950.00
	Recipients relationship to debtor			
9.3.	Southwest High School 11914 Dragon Lane, #800 San Antonio, TX 78252		05/22/2014	\$2,500.00
	Recipients relationship to debtor			
9.4.	Uvalde Festival 2401 Garner Field Rd. Uvalde, TX 78801		08/12/2014	\$2,500.00
	Recipients relationship to debtor			

Debtor **BILL HALL, JR., TRUCKING, LTD.**Case number (if known) **16-52608**

	Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.5.	San Antonio Livestock AT&T Parkway San Antonio, TX 78219		12/06/2014	\$1,500.00
	Recipients relationship to debtor			
9.6.	Castle Ridge Mortuary 8008 W. Military Dr. San Antonio, TX 78227		01/07/2015	\$4,374.00
	Recipients relationship to debtor			
9.7.	Kingdom Builders 15150 Nacogdoches Rd. San Antonio, TX 78247		01/19/2015	\$1,000.00
	Recipients relationship to debtor			
9.8.	Southwest High School 11914 Dragon Lane, #800 San Antonio, TX 78252		03/02/2015	\$2,000.00
	Recipients relationship to debtor			
9.9.	Ronald McDonald House 227 Lewis St. San Antonio, TX 78212		03/08/2015	\$2,300.00
	Recipients relationship to debtor			
9.10	TJ's Dance Class 12002 Bandera Rd., #106 Helotes, TX 78023		05/04/2015	\$1,060.00
	Recipients relationship to debtor			
9.11	Hunter Industrial 5080 FM 2439 New Braunfels, TX 78132		05/07/2015	\$1,000.00
	Recipients relationship to debtor			
9.12	U.S. Bank 10500 Sea World Dr. San Antonio, TX 78251	SWISD	05/10/2015	\$4,200.00
	Recipients relationship to debtor			

Debtor **BILL HALL, JR., TRUCKING, LTD.**Case number (if known) **16-52608**

	Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.13	Southwest High School 11914 Dragon Lane, #800 San Antonio, TX 78252	SWISD Dance		\$3,000.00
	Recipients relationship to debtor			
9.14	Southwest High School 11914 Dragon Lane, #800 San Antonio, TX 78252	Charity		\$5,000.00
	Recipients relationship to debtor			
9.15	San Antonio Food Bank 5200 Enrique M. Barrera Pkwy. San Antonio, TX 78227		09/26/2015	\$1,000.00
	Recipients relationship to debtor			
9.16	Southwest High School 11914 Dragon Lane, #800 San Antonio, TX 78252	Education	09/30/2015	\$5,000.00
	Recipients relationship to debtor			

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Debtor **BILL HALL, JR., TRUCKING, LTD.**Case number (if known) **16-52608**

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	James S. Wilkins Willis & Wilkins, L.L.P. 711 Navarro Street, Suite 711 San Antonio, TX 78205-1711			\$17,500.00
	Email or website address			
	Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy From-To
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Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:
- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
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Part 9: Personally Identifiable Information

Debtor **BILL HALL, JR., TRUCKING, LTD.**Case number (if known) **16-52608****16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- ☒ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- ☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

- ☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
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Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

- ☐ None

Owner's name and address	Location of the property	Describe the property	Value
Bill Hall, Jr. Trucking GP, LLC		This Debtor has all of its property and equipment at the same location 9630 Cagdon, San Antonio, Texas 78252. The property is described in the bankruptcy schedules of that LLC.	\$0.00

Part 12: Details About Environment Information

Debtor **BILL HALL, JR., TRUCKING, LTD.**Case number (if known) **16-52608**

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.**Report all notices, releases, and proceedings known, regardless of when they occurred.****22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

- ☒ No.
- ☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
- ☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
- ☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☐ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1. Halco Holdings	Transportation	Dates business existed EIN: 27-4542988 From-To January 2011-Present
25.2. Bill Hall, Jr. Trucking GP, LLC		EIN: 27-4543162 From-To 2011-Present

26. Books, records, and financial statements**26a.** List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☒ None

Name and address	Date of service From-To
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26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement

Debtor **BILL HALL, JR., TRUCKING, LTD.**Case number (if known) **16-52608**

within 2 years before filing this case.

☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None**Name and address****If any books of account and records are unavailable, explain why**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None**Name and address****27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No☐ Yes. Give the details about the two most recent inventories.**Name of the person who supervised the taking of the inventory****Date of inventory****The dollar amount and basis (cost, market, or other basis) of each inventory**

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Dominique Hall	807 Fleet Admiral San Antonio, TX 78245	Adminstratrix of Estate of Bill Hall, Jr. and has Power of Attorney for Frances Hall	None

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☐ No☒ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
Frances Hall	18357 Shadow Canyon Helotes, TX 78023	Owner 100%	Opening - 09/08/2011

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☒ No☐ Yes. Identify below.**Name and address of recipient****Amount of money or description and value of property****Dates****Reason for providing the value**

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

☒ No☐ Yes. Identify below.

Debtor **BILL HALL, JR., TRUCKING, LTD.**Case number (if known) **16-52608**

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **December 6, 2016****/s/ DOMINIQUE HALL**

Signature of individual signing on behalf of the debtor

DOMINIQUE HALL

Printed name

Position or relationship to debtor **AUTHORIZED REPRESENTATIVE OF
GENERAL PARTNER**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No
☐ Yes

United States Bankruptcy Court
Western District of Texas

In re **BILL HALL, JR., TRUCKING, LTD.**

Debtor(s)

Case No. **16-52608**

Chapter **11**

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
- | | | |
|---|----|------------------|
| For legal services, I have agreed to accept | \$ | 17,500.00 |
| Prior to the filing of this statement I have received | \$ | 17,500.00 |
| Balance Due | \$ | 0.00 |
2. The source of the compensation paid to me was:
- ☒ Debtor ☐ Other (specify):
3. The source of compensation to be paid to me is:
- ☒ Debtor ☐ Other (specify):
4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - [Other provisions as needed]
6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

December 6, 2016

Date

/s/ JAMES S. WILKINS

JAMES S. WILKINS 21486500

Signature of Attorney

JAMES S. WILKINS

WILLIS & WILKINS, L.L.P.

711 Navarro Street, Suite 711

San Antonio, TX 78205-1711

210-271-9212 Fax: 210-271-9389

jwilkins@stic.net

Name of law firm

**United States Bankruptcy Court
Western District of Texas**

In re **BILL HALL, JR., TRUCKING, LTD.**

Debtor(s)

Case No. **16-52608**

Chapter **11**

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
FRANCIS HALL	COMMON	100%	

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **AUTHORIZED REPRESENTATIVE OF GENERAL PARTNER** of the partnership named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **December 6, 2016**

Signature **/s/ DOMINIQUE HALL**
DOMINIQUE HALL

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.*